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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/582,771	08/29/2000	Norbert W. Quast	DB000852-000	2847

24122 7590 09/29/2003

THORP REED & ARMSTRONG, LLP  
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PITTSBURGH, PA 15219-1425

EXAMINER

HOANG, PHUONG N

ART UNIT	PAPER NUMBER
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2126

DATE MAILED: 09/29/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Interview Summary</b>	<b>Application No.</b>	<b>Applicant(s)</b>	
	09/582,771	QUAST, NORBERT W.	
	<b>Examiner</b>	<b>Art Unit</b>	
	Phuong N. Hoang	2126	

All participants (applicant, applicant's representative, PTO personnel):

(1) Phuong N. Hoang. (3) \_\_\_\_\_.

(2) Richard Coldren. (4) \_\_\_\_\_.

Date of Interview: 28 August 2003.

Type: a) ☒ Telephonic b) ☐ Video Conference  
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☒ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.  
If Yes, brief description: \_\_\_\_\_.

Claim(s) discussed: Independent claims 1, 10.

Identification of prior art discussed: IDS.

Agreement with respect to the claims f) ☒ was reached. g) ☐ was not reached. h) ☐ N/A.


Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Applicant's representative agreed that all claim limitations are met.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

**JOHN FOLLANSBEE  
SUPERVISORY PATENT EXAMINER  
TECHNOLOGY CENTER 2100**

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

  
\_\_\_\_\_  
Examiner's signature, if required